

## I. Amendments to the Specification

Kindly amend the paragraph on page 9, lines 22-27, to read as follows:

Balloon dilation catheter 100 (Figure 1) has mounted on balloon 115 thereof a stent 30. Further, guidewire 160 is disposed in second lumen 150 such that it emanates from opening 130 and from distal end 110 of balloon dilation catheter 100. Preferably, this is achieved in a conventional manner by feeding guidewire 160 into second lumen 150 at distal end 110 of balloon dilation catheter 100 until the proximal end of guidewire 160 emanates from opening 130.

Kindly amend the first full paragraph on page 10 as follows:

Alternatively, it is possible to advance guidewire 160 to a point distally of blockage 15, after which the distal end of second lumen 150 of balloon dilation catheter 100 is passed onto the proximal end of guidewire 160. If it becomes difficult to advance guidewire 160 across blockage 15 using this technique, it is possible to advance balloon

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A dilation catheter 100 over the proximal end of guidewire 160 until that end exits opening 130 and the system may used in the "over-the-wire" approach described herein.

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Kindly amend the paragraph on page 13, lines 10-20 to read as follows:

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*W3*  
The initial steps of using balloon dilation catheter 200 are similar to those described above in relation to the use of balloon dilation catheter 100. Thus, once the balloon dilation catheter 200 has been withdrawn it is to be replaced with another balloon dilation catheter, the replacement balloon dilation catheter may be a conventional "monorail"-type balloon dilation catheter such as the one taught in Horzewski or balloon dilation catheter 200. Specifically, with reference to Figures 15 and 15a, balloon dilation catheter 200 is fed over guidewire 160 in the direction of arrow C. Once the proximal end of guidewire 160 approaches the area in guidewire lumen 255 corresponding to opening 250, it is biassed upwardly and outwardly from opening 250 by ramp 260, thereby rendering the replacement catheter 200 a "monorail"-type catheter. As stated above, the replacement catheter could be a conventional "monorail"-type catheter.

Kindly amend the paragraph on page 14, lines 12-27  
to read as follows:

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While this invention has been described with reference to illustrative embodiments, this description is not intended to be construed in a limiting sense. For example, while the illustrated embodiments depict use of the present balloon dilation catheter in delivery of a stent, those of skill in the art will immediately appreciate that the present balloon dilation catheter may be used in percutaneous transluminal coronary angioplasty techniques. Further, as will be apparent to those of skill in the art, it is possible to combine, in a single catheter, the slit illustrated in Figures 1-3 with the weakened region illustrated in Figures 14a, 14b and/or 14c. Further, while preferred, it is not strictly necessary for the weakened region illustrated in Figures 14a, 14b and/or 14c to extend along substantially the entire length of the tubular member. Still further, the specific nature of the weakened region illustrated in Figures 14a, 14b and 14c is not particularly restricted provided that it can be readily incised as the guidewire separated from the catheter - e.g., a perforated

region or a region comprising a plurality of small, partial cuts is also useful. Still further, it is possible to modify tubular member 125 such that one of lumen 140 and lumen 150 comprises a passageway having a substantially circular shaped cross-section while the other comprises a passageway having a substantially semi-circular shaped cross-section. Various modifications of the illustrative embodiments, as well as other embodiments of the invention, will be apparent to persons skilled in the art upon reference to this description. It is therefore contemplated that the appended claims will cover any such modifications or embodiments.

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